## FORM D

1273573

OMB APPROVAL

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# 07051379

### FORM D

**UNITED STATES** 

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix			Serial					
	DATE	RECEIVE	D					

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)									
Goldman Sachs Global Event Driven Institutional, Ltd.: Shares									
Filing Under (Check box(es) that apply):  Rule 504  Rule 505  Rule 506  Section 4(6)									
Type of Filing: ☐ New Filing ☐ Amendment									
A. BASIC IDENTIFICATION DATA									
Enter the information requested about the issuer									
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)									
Goldman Sachs Global Event Driven Institutional, Ltd.									
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New (609) 497-5500									
Jersey 08540									
Address of Principal Business Operations (Number and Street, Cit Programme Telephone Number (Including Area Code)									
(if different from Executive Offices)									
Brief Description of Business APR 2 7 2007	—								
To operate as a private investment fund.									
To operate as a private investment fund.  APR 2 7 2007  THOMSON									
Type of Business Organization	_								
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):									
☐ business trust ☐ limited partnership, to be formed									
Month Year									
Actual or Estimated Date of Incorporation or Organization:    0 3      0 2    Actual   Estimated									
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for									
State: CN for Canada; FN for other foreign jurisdiction ) FN									
DINION CLENOTROLOGICANO									

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00) 1 of 8

A. BASIC IDENTIFICATION DATA									
Enter the information requested for the following:									
* Each promoter of the issuer, if the issuer has been organized within the past five years;									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Investment Manager)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or  Managing Partner									
Full Name (Last name first, if individual)									
Pensionskasse Manor									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Utengasse 6, Basel, 4005 Switzerland									
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or  Managing Partner									
Full Name (Last name first, if individual)									
Employees' Retirement Plan of Sentara Health									
Business or Residence Address (Number and Street, City, State, Zip Code) 6015 Poplar Hall Drive, Suite 214, Norfolk, VA 23502									
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Building Service 32B-J Pension Fund									
Business or Residence Address (Number and Street, City, State, Zip Code)									
101 Avenue of the Americas, New York, New York 10013									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York 10005									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)									
Clark, Kent A.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)									
Lawson, Hugh J.									
Business or Residence Address (Number and Street, City, State, Zip Code)									

c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004

•				B. IN	FORMAT	ION ABO	OUT OFF	ERING			<u></u>	
B. INFORMATION ABOUT OFFERING									Yes	No		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										☑		
					• •	•		under ULO	E.			
2. What is the minimum investment that will be accepted from any individual?										\$1,000,000*		
*The Company at its discretion may accept subscriptions for lesser amounts.  3. Does the offering permit joint ownership of a single unit?										Yes ☑	No □	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										offering. ith a state		
Full Name	e (Last name	e first, if inc	lividual)									
	, Sachs & C											
Business	or Residence	e Address (1	Number and	Street, Cit	y, State, Zip	Code)						
	Street, Nev			004								
Name of A	Associated E	Broker or De	ealer									
	Which Perso								••••		☑ AI	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] e (Last name	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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Business of	or Residence	e Address (1	Number and	Street, Cit	v. State, Zip	Code)						
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Name of A	Associated E	Broker or De	ealer							<u></u> _	·	
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] e (Last name	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
run wante	e (Last name	: mst, n ma	iividuai)									
Business of	or Residence	Address (1	Number and	Street, City	y, State, Zip	Code)					· · · · · · · · · · · · · · · · · · ·	
Name of A	Associated B	Broker or De	ealer		· ·							<del> </del>
	Which Perso 'All States" (											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	(MO)
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
rrn	fSC1	(SD)	[TN]	(TX)	ft lT1	[VT]	[VA]	[WA]	rwvi	rwn	[WV]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total

	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0		\$_	0
	Equity (Shares)	\$	29,243,703		\$	29,243,703
	☑ Common ☐ Preferred					· · · · · · · · · · · · · · · · · · ·
	Convertible Securities (including warrants)	\$	0		\$	0
	Partnership Interests	\$	0		\$	0
	Other (Specify)	<b>s</b> -	0		\$_	0
	Total			_		29,243,703
	Answer also in Appendix, Column 3, if filing under ULOE.	_	. , ,	_	_	· · · · · ·
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number			Aggregate Dollar Amount
	A Post of the second se		Investors		_	of Purchases
	Accredited Investors	-	19	-	\$_	
	Non-accredited Investors	_	0	_	<b>\$</b> _	
	Total (for filings under Rule 504 only)	_	N/A	_	\$_	N/A
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering		Type of Security			Dollar Amount Sold
	Rule 505	_	N/A		\$_	N/A
	Regulation A		N/A		<b>\$</b> _	N/A
	Rule 504	_	N/A	_	\$_	N/A
			NI/A		\$	N/A
	Total		N/A	_		
tł tł	Total	_	:VA	_	_	
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of	_	:VA	_	<b>\$</b> _	0
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		_	\$_ \$_	0
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	_		- ] -	\$ - \$ - \$ -	-
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	_		_ ] ]	\$ _ \$ _ \$ _ \$ _	0
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	_		- ] ] ]	\$_ \$_ \$_	9,330
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	_		- 3 3 1	\$_ \$_ \$_	9,330 0
tł tł	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees.  Printing and Engraving Costs  Legal Fees.  Accounting Fees.  Engineering Fees.	_			\$_ \$_ \$_	0 9,330 0 0

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXI	PENS	ES A	AND USE OF PI	ROCE	EDS			
<ul> <li>b. Enter the difference between the aggre-</li> <li>- Question 1 and total expenses furnished difference is the "adjusted gross proceeds"</li> </ul>	\$_		29,234,373						
i. Indicate below the amount of the adjusted to be used for each of the purposes shown furnish an estimate and check the box payments listed must equal the adjusted gr to Part C - Question 4.b. above.	If the amount for any purpose is not to the left of the estimate. The total	knowi of th	n, ie						
				Payments to Officers, Directors, & Affiliates			Payments To Others		
Salaries and Fees			\$_	0	_ 🗆	\$_	0		
Purchase of real estate			\$_	0		\$_	0		
Purchase, rental or leasing and installation		\$_	0	_ 🗆	\$_	0			
Construction or leasing of plant buildings		\$_	0		<b>s</b> _	0			
Acquisition of other businesses (including this offering that may be used in excha another issuer pursuant to a merger)	nge for the assets or securities of		\$	0		\$	0		
Repayment of indebtedness			s –	0	-	<b>\$</b>	0		
Working capital			s –	0	-	s -	0		
Other (specify): Investment Capital			\$	0	- ☑	s _	29,234,373		
Column Totals			\$_	0		\$_	29,234,373		
Total Payments Listed (column totals adde			<b>☑</b> \$			<u> </u>			
	D. FEDERAL SIGNATU	RE		· · · · · · · · · · · · · · · · ·					
The issuer has duly caused this notice to be following signature constitutes an undertakin of its staff, the information furnished by the is	g by the issuer to furnish to the U.S. S.	ecuriti	ies an	d Exchange Comn	nission,	upon			
ssuer (Print or Type) Goldman Sachs Global Event Driven nstitutional, Ltd.			Date April <b>∫ 7</b> , 2007						
Name of Signer (Print or Type)	Title of Signer (Print or Type)								
athryn Pruess Vice President of the Issuer's Investment Manager									
stitutional, Ltd		tment	Man	<u> </u>					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

**END**